MAN

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/812434

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |   |   |              |                               |                              |                  |          | SMALL ENTITY TYPE   |                        | OR    | OTHER<br>SMALL      |                        |
|--|---|---|--------------|-------------------------------|------------------------------|------------------|----------|---------------------|------------------------|-------|---------------------|------------------------|
| TOTAL CLAIMS   |   |   | 8            |                               | ·                            |                  | ſ        | RATE                | FEE                    |       | RATE                | FEE                    |
| FOR  |   |   | NUMBER FILED |                               | NUMBER EXTRA                 |                  |          | BASIC FEE           | 385.00                 | OR    | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS.   |   |   | 8 minus 20=  |                               | • •                          |                  |          | X\$ 9=              | 1                      | OR    | X\$18=              |                        |
| INDEPENDENT CLAIMS   |   |   | 2 minus 3 =  |                               | • •                          |                  | ı        | X43=                |                        | OR    | X86=                |                        |
| MU   | LTIPLE DEPEN                                    | DENT CLAIM PF                             | RESENT       |                               |                              |                  | I        | +145=               |                        | OR    | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |   |   |              |                               |                              | L                | TOTAL    | 385                 | OR                     | TOTAL |                     |                        |
|  | C   | LAIMS AS A<br>(Column 1)                  | MENDED       | - PAR'<br>(Colur              |                              | (Column 3)       |          | SMALLE              | NTITY                  | OR    | OTHER<br>SMALL E    |                        |
| AMENDMENT A  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>DUSLY                 | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | . 8                                       | Minus        | # D                           | 0                            | - Ø              |          | X\$ 9=              |                        | OR    | X\$18=              | 1                      |
| ME   | Independent                                     | • )                                       | Minus        | ***                           | 3                            | <i>- 0</i>       |          | X43=                |                        | OR    | X86=                |                        |
| لسا  | PIRST PRESENTATION OF MOCHIFICE DEFENDENT GOSIM |   |              |                               |                              |                  | ۱ [      | +145=               | 1                      | OR    | +290=               | ./                     |
| 1.7  |   |   |              |                               |                              |                  |          | TOTAL<br>ADDIT. FEE | ·                      | OR    | TOTAL<br>ADDIT. FEE | /                      |
|  |   | (Column 1)                                |              |                               | •                            |                  | . ·      |                     |                        |       |                     |                        |
| AMENDMENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVI<br>PAID  | DUSLY                        | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | 'sta                          |                              | <b>.</b>         | ]        | X\$ 9=              |                        | OR    | X\$18=              |                        |
|  | Independent                                     | •   | Minus        | ***                           |                              | =                | ┧┇       | X43=                |                        | OR    | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                               |                              |                  | ┛        | +145=               |                        | OR    | +290=               |                        |
|  |   |   |              |                               |                              |                  |          | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)   |   |   |              |                               |                              |                  |          |                     |                        |       |                     |                        |
| AMENDMENT C  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | NUN PREVI                     | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | *   | Minus        | 64                            |                              | =                |          | X\$ 9=              |                        | OR    | X\$18=              |                        |
|  | Independent                                     | ŧ   | Minus        | ###                           |                              | <u> </u>         | <u> </u> | X43=                |                        | OR    | X86=                |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                               |                              |                  |          | +145=               |                        | OR    |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **TOTAL**  * |   |   |              |                               |                              |                  |          |                     |                        | OR    | TOTAL               |                        |
| **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.   |   |   |              |                               |                              |                  |          |                     |                        |       |                     |                        |